PTO/SB/17 (10-08)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Complete if Known

10/719,871

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Application Number

us one to the	Consolidated Appropriations Act, 2005 (H.R. 4818).
	TRANSMITTAL
	INAMOMITIAL
	For FY 2009

Effective on 12/08/2004.

November 21, 2003 Filing Date RICHARD M. EDWARDS First Named Inventor **Examiner Name** Nguyen, Allen H Applicant claims small entity status. See 37 CFR 1.27 2625 TOTAL AMOUNT OF PAYMENT (\$) 1.920.00 Attorney Docket No. 081174-0306117

				Allomey Docke	110. 001	1/4-030011	1 /		
METHOD OF PAYMEN	METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 033975 Deposit Account Name: PILLSBURY WINTHROP SHAW PITTMAN LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee X Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION									
BASIC FILING, SEAR Application Type	FILING F		SEARCH	Small Entity		TION FEES	Fees Paid (\$)		
Utility	330	165	540	<u>Fee (\$)</u> 270	220	<u>Fee (\$)</u> 110			
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325			
Provisional	220								
Provisional 220 110 0 0 0 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 52 26 Each independent claim over 3 (including Reissues) 220 110 Multiple dependent claims 390 195 Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) -3 or HP = x = Fee Paid (\$) —									
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x 270.00 = 0.00									
4. OTHER FEE(S) Non-English Specific	cation, \$1	30 fee (no smal	Il entity di	scount)			Fees Paid (\$)		
Other (e.g., late filing surcharge): RCF/Petition for Three-Month Extension of Time									

SUBMITTED BY	/				
Signature	(Intl)	Registration No. (Attorney/Agent)	56,817	Telephone	213.488.7238
Name (Print/Type)	Carolyn S. Lu			Date Feb	ruary 9, 2009

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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	Application Number	10/719,871	•			
Effective on 12/08/2004. EEE TRANSMITTAL For FY 2009 Discart claims small entity status. See 37 CFR 1.27	Filing Date	November 21, 2003	•			
	First Named Inventor	RICHARD M. EDWARDS				
plicant claims small entity status See 37 CED 1 27	Examiner Name	Nguyen, Allen H	•			
Sheart claims small critity status. See 57 CFR 1.27	Art Unit	2625	•			

TOTAL AMOUNT OF PAYMEN	T (\$)	1,920.00	Attorney Dock	et No. 081	174-030611	7			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 033975 Deposit Account Name: PILLSBURY WINTHROP SHAW PITTMAN LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee X Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card									
information and authorization on PTFEE CALCULATION	TO-2038.		W						
1. BASIC FILING, SEARCH,									
	ILING FEES Small I	Entity	CH FEES Small Entity	S	TION FEES				
	e (\$) Fee		Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)			
	30 165		270	220	110				
0	20 110	100	50	140	70	10.			
Plant 22	20 110	330	165	170	85				
Reissue 33	30 165	540	270	650	325				
Provisional 22	20 110	0	0	0	0				
Each independent claim or Multiple dependent claims Total Claims Extr. - 20 or HP =	2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims								
HP = highest number of total claims Indep. Claims Extra - 3 or HP = HP = highest number of independent	a Claims x	<u>Fee (\$) </u>	Paid (\$)		<u>Fee (\$)</u>	Fee Paid (\$)			
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 OTHER FEE(S) Non-English Specification 	. \$130 fee	(no small entity d	iscount)			Fees Paid (\$)			
Other (e.g., late filing surc				tension of	Time	1,920.00			

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Signature	Colla	Registration No. (Attorney/Agent)	56,817	Telephone	213.488.7238
Name (Print/Type)	Carolyn S. Lu			Date Fo	bruary 9, 2009

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Attorney's Docket 081174-0306117 ent Reference:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

ATENT APPLICATION of: RICHARD M. EDWARDS ET AL. Confirmation Number: 3053

Application No.: 10/719,871

Group Art Unit: 2625

Filed: November 21, 2003

Examiner: Nguyen, Allen H

MEDIA SELECTION METHODS IN A MULTI-MEDIA PRINTER UTILIZING

PRINT CLIENT INDICATORS

Commissioner for Patents P.O. Box 1450 **Alexandria, VA 22313-1450**

AMENDMENT/RESPONSE TRANSMITTAL

Transmitted herewith is an amendment/response for this application.

EXTENSION OF TIME

The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for a three-month extension of time under 37 C.F.R. 1.136.

FEES

The fee for claims and extension of time (37 C.F.R. 1.16 and 1.17) has been calculated as shown below:

•										
	CLAIMS								-	
	REMAINING	HIGH	EST NO.							
	AFTER	PRE\	HOUSLY	PRI	ESENT				ADDIT.	
	AMENDMENT	PAI	D FOR	E	XTRA	RA	TE	,	FEE	
						X				
TOTAL	25		34	=	0	\$	52.00	= .	\$	0.00
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INDEP.	5		6	=	0	\$	220.00	=	\$	0.00
FIRST F	PRESENTATION	1 OF I	MULTIPLE	DE	5	+				
CLAIM						\$	390.00	=	\$	0.00
			TO	TAL .	<u> ADDITION</u>	VAL CLA	AIM FEE		· \$	0.00

REQUEST FOR CONTINUED EXAMINATION FEE	\$ 810.00
EXTENSION OF TIME FEE	\$ 1,110.00
GRAND TOTAL	\$ 1,920.00

FEE PAYMENT

Authorization is hereby made to charge the amount of \$1,920.00 to Deposit Account No. 033975. Charge any additional fees required by this paper or credit any overpayment in the manner authorized above. A duplicate of this paper is attached.

Date: February 9, 2009

PILLSBURY WINTHROP SHAW PITTMAN LLP
725 South Figueroa Street
Suite 2800

Los Angeles, CA 90017-5406
213 488.7238

Date: February 9, 2009

CAROLYN S. LU Reg. No. 56,817

CERTIFICATION UNDÉR 37 C.F.R. [] 1.8 and/or 1.10*

(When using Express Mail, the Express Mail label number is mandatory; Express Mail certification is optional.)

I hereby certify that, on the date shown below, this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Signature

KUMIKO ALEXANDER

(type or print name of person certifying)

^{*} Only the date of filing (§ 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under [] 1.8 continues to be taken into account in determining timeliness. See [] 1.703(f). Consider "Express Mail Post Office to Addressee" ([] 1.10) or facsimile transmission ([] 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

REQUEST FOR CONTINUED EXAMINATION FEE	\$ 810.00
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725 South Figueroa Street
Suite 2800
Los Angeles, CA 90017-5406
213 488.7238

CAROLYN S. LÚ Reg. No. 56,817

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